SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	FOR LINE (check only	one) 22 <b>x</b> 23 26 27
Any information copied from such Reports and States or for commercial purposes, other than using the nar	ments may i	not be sold or use		
NAME OF COMMITTEE (In Full)  American Medical Response Inc P				Sonot Continuations from Such Confinitee.
Full Name (Last, First, Middle Initial)  A. Mike Thompson For Congress  Mailing Address 5430 Medican Avenue				Date of Disbursement
Mailing Address 5429 Madison Avenue	0	7: 0 1		07 26 2017
City Sacramento Purpose of Disbursement	State CA	Zip Code 95841	011	FEC Identification Number  C C00326363
Candidate Name Thompson, Mike, , Rep., Type				Transaction ID: 41178234 Amount of Each Disbursement this Period 500.00
Office Sought:  Senate  President  State: CA  Disbursel	Primary Other (spec	<b>✗</b> General		Memo Item
Full Name (Last, First, Middle Initial)  3.				Date of Disbursement
Mailing Address				M M / D D / Y Y Y Y
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement				С
Candidate Name  Category/ Type				Amount of Each Disbursement this Period
Senate President	Senate Primary General President Other (specify)			Memo Item
State: District:  Full Name (Last, First, Middle Initial)  C.				Date of Disbursement
Mailing Address				M M / D D / Y Y Y Y
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement  Candidate Name  Category/ Type				C  Amount of Each Disbursement this Period
Office Sought: House Disbursel Senate President	ouse Disbursement For: enate Primary General			Mama Itam
State: District:				Memo Item
SUBTOTAL of Disbursements This Page (optional)			·····•	500.00
TOTAL This Period (last page this line number only)	)			500.00